

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	69007	10/5/99
O.I.P.E. CLASSIFIER		5	10-7-99
FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	10/1/99
2	✓	✓	10/1/99
3	✓	✓	10/1/99
4	✓	✓	10/1/99
5	✓	✓	10/1/99
6	✓	✓	10/1/99
7	✓	✓	10/1/99
8	✓	✓	10/1/99
9	✓	✓	10/1/99
10	✓	✓	10/1/99
11	✓	✓	10/1/99
12	✓	✓	10/1/99
13	✓	✓	10/1/99
14	✓	✓	10/1/99
15	✓	✓	10/1/99
16	✓	✓	10/1/99
17	✓	✓	10/1/99
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31	✓	✓	10/1/99
32	✓	✓	10/1/99
33	✓	✓	10/1/99
34	✓	✓	10/1/99
35	✓	✓	10/1/99
36	✓	✓	10/1/99
37	✓	✓	10/1/99
38	✓	✓	10/1/99
39	✓	✓	10/1/99
40	✓	✓	10/1/99
41	✓	✓	10/1/99
42	✓	✓	10/1/99
43	✓	✓	10/1/99
44	✓	✓	10/1/99
45	✓	✓	10/1/99
46	✓	✓	10/1/99
47	✓	✓	10/1/99
48	✓	✓	10/1/99
49	✓	✓	10/1/99
50	✓	✓	10/1/99

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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